

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/574,863

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
U.S. NATIONAL STAGE FEES		
BASIC FEE		
EXAMINATION FEE		
SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.	minus 100 =	/ 50 =
TOTAL CHARGEABLE CLAIMS	14	17 minus 20 = *
INDEPENDENT CLAIMS	4	minus 3 = *
MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/>		

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	
EXAM. FEE	
SEARCH FEE	
X \$ 125 =	
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL	

OR

RATE	FEE
BASIC FEE	300
EXAM. FEE	200
SEARCH FEE	400
X \$ 250 =	
X \$ 50 =	
X \$ 200 =	200
+ \$ 360 =	360
TOTAL	1460

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 17	Minus ** 20	= -
Independent	* 4	Minus *** 4	= -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
X \$ 50 =	
X \$ 200 =	
+ \$ 360 =	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
X \$ 50 =	
X \$ 200 =	
+ \$ 360 =	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Substitute for Form PTO-875					Application or Docket Number <b>10/574,863</b>		Filing Date <b>04/06/2006</b>		<input type="checkbox"/> To be Mailed	
<b>APPLICATION AS FILED – PART I</b>										
(Column 1)			(Column 2)		SMALL ENTITY <input type="checkbox"/> OR		OTHER THAN SMALL ENTITY			
FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)	RATE (\$)	FEE (\$)	RATE (\$)	FEE (\$)	RATE (\$)	FEE (\$)
<input type="checkbox"/> BASIC FEE (37 CFR 1.18(a), (b), or (c))	N/A	N/A	N/A		N/A		N/A		N/A	
<input type="checkbox"/> SEARCH FEE (37 CFR 1.18(b), (i), or (m))	N/A	N/A	N/A		N/A		N/A		N/A	
<input type="checkbox"/> EXAMINATION FEE (37 CFR 1.18(o), (p), or (q))	N/A	N/A	N/A		N/A		N/A		N/A	
TOTAL CLAIMS (37 CFR 1.18(j))	minus 20 =	•	X \$ =		OR	X \$ =		X \$ =		
INDEPENDENT CLAIMS (37 CFR 1.18(h))	minus 3 =	•	X \$ =		OR	X \$ =		X \$ =		
<input type="checkbox"/> APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL		TOTAL					
<b>APPLICATION AS AMENDED – PART II</b>										
(Column 1)			(Column 2)		(Column 3)		SMALL ENTITY OR		OTHER THAN SMALL ENTITY	
12/19/2006	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)	ADDITIONAL FEE (\$)
Total (37 CFR 1.18(j))	• 31	Minus • 22	= 9	X \$ =		OR	X \$50=		450	
Independent (37 CFR 1.18(h))	• 2	Minus *** 4	= 0	X \$ =		OR	X \$200=		0	
<input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))						OR				
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						OR				
			TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		TOTAL ADD'L FEE		450
(Column 1)			(Column 2)		(Column 3)		SMALL ENTITY OR		OTHER THAN SMALL ENTITY	
AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)	ADDITIONAL FEE (\$)
Total (37 CFR 1.18(j))	• 31	Minus • 31	= —	X \$ =		OR	X \$ =		—	
Independent (37 CFR 1.18(h))	• 2	Minus *** 21	= —	X \$ =		OR	X \$ =		—	
<input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))						OR				
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						OR				
			TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		TOTAL ADD'L FEE		—
<p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</p> <p>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</p> <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p>										

Legal Instrument Examiner:  
Stella Little

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.